IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kenneth Shanton : Art Unit: 3627

Serial No.: 10/646,912 : Art Olini: 302

: Examiner: Champagne, Luna

Filed: August 22, 2003

For: POINT-OF-PURCHASE

DISPLAY WITH RFID
INVENTORY CONTROL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL

Transmitted herewith is:
 Transmittal (3 pages)
 Amendment in response to Office Action dated November 28, 2008 (22 pages)
 STATUS

2.	Applican Applican	t
		claims small entity status.
		is other than a small entity.

EXTENSION OF TERM

3.	The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. (complete (a) or (b), as applicable) (a) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)						
Ext	ension for re	esponse within:	Other than small entity Fee	Small entity Fee (if applicable)			
		first month	\$ 130.00	\$ 65.00			
		second month	\$ 490.00	\$ 245.00			
		third month	\$ 1,110.00	\$ 555.00			
		fourth month	\$ 1,730.00	\$ 865.00			
		fifth month	\$ 2,350.00	\$1,175.00			
			Fee Due				
If a	n additional	extension of time is required, (Check and complete the	please consider this a pet	ition therefor.			
	ſ	An extension of mo paid therefor \$ is demonths of extension now	educted from the total fee	cured. The fee due for the total			
		Extension fee d	ue with this request \$				
	(b) 🔀	OR Applicant believes that no ext conditional petition is being n applicant has inadvertently ov extension of time.	nade to provide for the po	ssibility that			

FEE FOR CLAIMS

4. Т	he fee	for cla	ims (37 (C.F.R. 1.16(b)-(d)) has b	een calculated as s	hown	below:
	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT			(Col. 2)	(Col. 3)	SMALL ENTITY		SMALL ENTITY
				HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL. RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL			MINUS		=	x \$26.00 = \$		x \$52.00 = \$
TOTAL INDEP.			MINUS		=	x \$110.00 = \$		x \$220.00 = \$
	FIRST	PRESEN	TATION OF	MULTIPLE DEP. (CLAIM	+\$195.00 = \$		+ \$390.00 = \$
						TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$
	(a)	\boxtimes	No add	itional fee fo	r Claims is	required		
					OR			
	(b)		Total a	dditional fee	for claims	required \$		
				FEE :	PAYMEN	Т		
5.		Attach	ned is a c	heck in the s	um of \$			
	口			t Account No this transmit FEE D		ed.		
6.	\boxtimes	If any 01-23				s required, charge	Depo	sit Account No.
				A	ND/OR			
		If any 2384.	addition	al fee for cla	ims is requ	ired, charge Deposi	t Acc	ount No. 01-
7.		Other	:					
					Reg	niel M. Fitzgerald 3. No. 38,880	M	
					One St.	MSTRONG TEAS Metropolitan Squa Louis, MO 63102 /621-5070		